
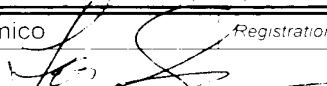


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PTO/SB/05 (03-01)  
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|---|------------|---|----------------|
| <b>UTILITY<br/>PATENT APPLICATION<br/>TRANSMITTAL</b><br><small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>   |            | Attorney Docket No. <b>M4065.0479/P479</b><br>First Inventor <b>Stephen L. Casper</b><br>Title <b>PROGRAMMABLE CONDUCTOR</b><br>Express Mail Label No. _____  |                |
| <b>APPLICATION ELEMENTS</b><br><small>See MPEP chapter 600 concerning utility patent application contents</small>   |            | <b>ADDRESS TO:</b> Box Patent Application<br>Commissioner for Patents<br>Washington, DC 20231   |                |
| 1 <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17)<br><small>Submit an original and a duplicate for fee processing.</small><br>2 <input type="checkbox"/> Applicant claims small entity status<br><small>See 37 CFR 1.27</small><br>3 <input checked="" type="checkbox"/> Specification <span style="float: right;">[Total Pages <b>29</b>]</span><br><small>Preferred arrangement set forth below:</small><br>- Descriptive title of the invention<br>- Cross Reference to Related Applications<br>- Statement Regarding Federal Research & Development<br>- Reference to sequence listing, if applicable<br>- Computer program listing appendix<br>- Background of the invention<br>- Brief Summary of the invention<br>- Brief Description of the Drawings, if applicable<br>- Detailed Description<br>- Claims<br>- Abstract of the Disclosure<br>4 <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) <span style="float: right;">[Total Sheets <b>7</b>]</span><br>5 Oath or Declaration <span style="float: right;">[Total Pages <b>4</b>]</span><br>a <input checked="" type="checkbox"/> Newly executed (original or copy)<br>b <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d))<br><small>For continuation applications, attach to the completed</small><br><input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b><br><small>Signed statement attached to deletion of inventor(s) named in the prior application see 37 CFR 1.63(d)(2) and 1.33(b)</small><br>6 <input type="checkbox"/> Application Data Sheet See 37 CFR 1.76 |            | 7 <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or<br>Computer Program (Appendix)<br>8 <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission<br><small>(if applicable, all necessary)</small><br>a <input type="checkbox"/> Computer Readable Form (CRF)<br>b <input type="checkbox"/> Specification Sequence Listing on:<br>i <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii <input type="checkbox"/> paper<br>c <input type="checkbox"/> Statements verifying identity of above copies<br><b>ACCOMPANYING APPLICATIONS PARTS</b><br>9 <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))<br>10 <input checked="" type="checkbox"/> 37 CFR 3.73(b) Statement <input checked="" type="checkbox"/> Power of Attorney<br><small>(when there is an assignee)</small><br>11 <input type="checkbox"/> English Translation Document (if applicable)<br>12 <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations<br>13 <input type="checkbox"/> Preliminary Amendment<br>14 <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503)<br><small>(Should be specifically itemized)</small><br>15 <input type="checkbox"/> Certified Copy of Priority Document(s)<br><small>(if foreign priority is claimed)</small><br>16 <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i)<br><small>Applicant must attach form PTO/SB/35 or its equivalent</small><br>17 <input type="checkbox"/> Other _____ |                |
| 18 If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below, and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:<br><input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No. _____<br>Prior application information: Examiner _____ Group / Art Unit _____<br><b>For CONTINUATION or DIVISIONAL APPS only:</b> The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.   |            |   |                |
| <b>19 CORRESPONDENCE ADDRESS</b>  |            |   |                |
| <input checked="" type="checkbox"/> Customer Number or Bar Code Label   |            | <br>24998  |                |
| or <input type="checkbox"/> Correspondence address below  |            |   |                |
| Name <b>DICKSTEIN SHAPIRO MORIN &amp; OSHINSKY LLP</b>  |            |   |                |
| Address <b>2101 L Street NW</b>   |            |   |                |
| City  | Washington | State   | DC             |
| Zip Code  | 20037-1526 |   |                |
| Country   | US         | Telephone   | (202) 785-9700 |
|   |            | Fax   | (202) 887-0689 |
| Name (Print/Type) <b>Thomas J. D'Amico</b>  |            | Registration No. (Attorney/Agent) <b>28,371</b>   |                |
| Signature    |            | Date <b>February 19, 2002</b>   |                |

| <b>FEE TRANSMITTAL<br/>for FY 2002</b>   |  |  |  | <i>Complete if Known</i> |                   |
|--|--|--|--|--------------------------|-------------------|
| <i>Patent fees are subject to annual revision.</i>                             |  |  |  | Application Number       | New               |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27 |  |  |  | Filing Date              | February 19, 2002 |
| <b>TOTAL AMOUNT OF PAYMENT</b> (\$) 1848.00                                    |  |  |  | First Named Inventor     | Stephen L. Casper |
|  |  |  |  | Examiner Name            | Not Yet Assigned  |
|  |  |  |  | Group Art Unit           | Not Yet Assigned  |
|  |  |  |  | Attorney Docket No.      | M4065.0479/P479   |

| METHOD OF PAYMENT (check all that apply)  |  | FEE CALCULATION (continued)      |              |  |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |     |     |                        |  |   |              |       |              |       |   |          |          |          |          |          |  |    |     |     |                        |    |   |    |     |     |                                   |    |  |     |     |       |                                       |     |   |    |     |       |  |     |  |    |     |     |  |     |                  |  |     |     |     |     |  |  |     |     |     |    |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
|---|--|----------------------------------|--------------|--|-----------------|-----------------|----------|----------|----------|----------|----------|-----|-----|-----|--------------------|-------------------------------------|-----|-----|-----|-----|-------------------|--|-----|-----|-----|-----|------------------|---------------------------|-----|-----|-------|-----|--------------------|---|-----|-----|-----|-----|------------------------|--|---|--------------|-------|--------------|-------|---|----------|----------|----------|----------|----------|--|----|-----|-----|------------------------|----|---|----|-----|-----|-----------------------------------|----|--|-----|-----|-------|---------------------------------------|-----|---|----|-----|-------|--|-----|--|----|-----|-----|--|-----|------------------|--|-----|-----|-----|-----|--|--|-----|-----|-----|----|--------------------------|--|-----|-------|-----|-------|---|--|-----|-----|-----|----|----------------------------------|--|-----|-------|-----|-----|------------------------------------|--|-----|-------|-----|-----|--------------------------------|--|-----|-----|-----|-----|------------------|--|-----|-----|-----|-----|-----------------|--|-----|-----|-----|-----|-------------------------------|--|-----|----|-----|----|-------------------------------------|--|-----|-----|-----|-----|---|--|-----|----|-----|----|--|-------|-----|-----|-----|-----|---|--|-----|-----|-----|-----|--|--|-----|-----|-----|-----|---|--|-----|-----|-----|-----|---|--|
| <input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other Name<br><input checked="" type="checkbox"/> Deposit Account<br>Deposit Account Number: 04-1073<br>Deposit Account Name: Dickstein Shapiro Morin & Oshinsky LLP<br>The Commissioner is hereby authorized to: <input checked="" type="checkbox"/> Charge fees indicated below <input checked="" type="checkbox"/> Credit any overpayments.<br><input type="checkbox"/> Charge any additional fees during the pendency of this application.<br><input type="checkbox"/> Charge fee(s) indicated below except for the filing fee to the above-identified deposit account.  | <b>3. ADDITIONAL FEES</b><br><table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>105</td><td>130</td><td>205</td><td>65</td><td>Surcharge - late filing fee or oath</td><td></td></tr> <tr><td>127</td><td>50</td><td>227</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet</td><td></td></tr> <tr><td>139</td><td>130</td><td>139</td><td>13</td><td>Non-English specification</td><td></td></tr> <tr><td>147</td><td>2,520</td><td>147</td><td>2,520</td><td>For filing a request for ex parte reexamination</td><td></td></tr> <tr><td>112</td><td>920</td><td>112</td><td>920</td><td>Requesting publication of SIR prior to Examiner action</td><td></td></tr> <tr><td>112</td><td>1,840</td><td>112</td><td>1,840</td><td>Requesting publication of SIR after Examiner action</td><td></td></tr> <tr><td>113</td><td>110</td><td>215</td><td>55</td><td>Extension for reply within first month</td><td></td></tr> <tr><td>113</td><td>400</td><td>216</td><td>20</td><td>Extension for reply within second month</td><td></td></tr> <tr><td>117</td><td>920</td><td>217</td><td>46</td><td>Extension for reply within third month</td><td></td></tr> <tr><td>118</td><td>1,440</td><td>218</td><td>720</td><td>Extension for reply within fourth month</td><td></td></tr> <tr><td>128</td><td>1,960</td><td>228</td><td>980</td><td>Extension for reply within fifth month</td><td></td></tr> <tr><td>119</td><td>320</td><td>219</td><td>160</td><td>Notice of Appeal</td><td></td></tr> <tr><td>120</td><td>320</td><td>220</td><td>160</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td>121</td><td>260</td><td>221</td><td>14</td><td>Request for oral hearing</td><td></td></tr> <tr><td>138</td><td>1,510</td><td>138</td><td>1,510</td><td>Petition to institute a public use proceeding</td><td></td></tr> <tr><td>140</td><td>110</td><td>240</td><td>55</td><td>Petition to revive - unavoidable</td><td></td></tr> <tr><td>141</td><td>1,280</td><td>241</td><td>640</td><td>Petition to revive - unintentional</td><td></td></tr> <tr><td>141</td><td>1,280</td><td>242</td><td>640</td><td>Utility issue fee (or reissue)</td><td></td></tr> <tr><td>142</td><td>460</td><td>243</td><td>230</td><td>Design issue fee</td><td></td></tr> <tr><td>144</td><td>620</td><td>244</td><td>310</td><td>Plant issue fee</td><td></td></tr> <tr><td>122</td><td>120</td><td>122</td><td>130</td><td>Petitions to the Commissioner</td><td></td></tr> <tr><td>123</td><td>52</td><td>123</td><td>52</td><td>Processing fee under 37 CFR 1.17(q)</td><td></td></tr> <tr><td>126</td><td>180</td><td>126</td><td>180</td><td>Submission of Information Disclosure Stmt</td><td></td></tr> <tr><td>58*</td><td>40</td><td>58*</td><td>40</td><td>Recording each patent assignment per property (times number of properties)</td><td>40.00</td></tr> <tr><td>148</td><td>740</td><td>248</td><td>370</td><td>Filing a submission after final rejection (37 CFR 1.129(a))</td><td></td></tr> <tr><td>149</td><td>740</td><td>249</td><td>370</td><td>For each additional invention to be examined (37 CFR 1.129(b))</td><td></td></tr> <tr><td>179</td><td>740</td><td>279</td><td>370</td><td>Request for Continued Examination (RCE)</td><td></td></tr> <tr><td>169</td><td>900</td><td>169</td><td>900</td><td>Request for expedited examination of a design application</td><td></td></tr> </tbody> </table> Other fee(s) specify: _____<br>*Reduced by Basic Filing Fee Paid | Large Entity                     |              | Small Entity   |                 | Fee Description | Fee Paid | Fee Code | Fee (\$) | Fee Code | Fee (\$) | 105 | 130 | 205 | 65                 | Surcharge - late filing fee or oath |     | 127 | 50  | 227 | 25                | Surcharge - late provisional filing fee or cover sheet |     | 139 | 130 | 139 | 13               | Non-English specification |     | 147 | 2,520 | 147 | 2,520              | For filing a request for ex parte reexamination |     | 112 | 920 | 112 | 920                    | Requesting publication of SIR prior to Examiner action |   | 112          | 1,840 | 112          | 1,840 | Requesting publication of SIR after Examiner action |          | 113      | 110      | 215      | 55       | Extension for reply within first month |    | 113 | 400 | 216                    | 20 | Extension for reply within second month |    | 117 | 920 | 217                               | 46 | Extension for reply within third month |     | 118 | 1,440 | 218                                   | 720 | Extension for reply within fourth month |    | 128 | 1,960 | 228  | 980 | Extension for reply within fifth month |    | 119 | 320 | 219  | 160 | Notice of Appeal |  | 120 | 320 | 220 | 160 | Filing a brief in support of an appeal |  | 121 | 260 | 221 | 14 | Request for oral hearing |  | 138 | 1,510 | 138 | 1,510 | Petition to institute a public use proceeding |  | 140 | 110 | 240 | 55 | Petition to revive - unavoidable |  | 141 | 1,280 | 241 | 640 | Petition to revive - unintentional |  | 141 | 1,280 | 242 | 640 | Utility issue fee (or reissue) |  | 142 | 460 | 243 | 230 | Design issue fee |  | 144 | 620 | 244 | 310 | Plant issue fee |  | 122 | 120 | 122 | 130 | Petitions to the Commissioner |  | 123 | 52 | 123 | 52 | Processing fee under 37 CFR 1.17(q) |  | 126 | 180 | 126 | 180 | Submission of Information Disclosure Stmt |  | 58* | 40 | 58* | 40 | Recording each patent assignment per property (times number of properties) | 40.00 | 148 | 740 | 248 | 370 | Filing a submission after final rejection (37 CFR 1.129(a)) |  | 149 | 740 | 249 | 370 | For each additional invention to be examined (37 CFR 1.129(b)) |  | 179 | 740 | 279 | 370 | Request for Continued Examination (RCE) |  | 169 | 900 | 169 | 900 | Request for expedited examination of a design application |  |
| Large Entity  |  | Small Entity                     |              | Fee Description  | Fee Paid        |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |     |     |                        |  |   |              |       |              |       |   |          |          |          |          |          |  |    |     |     |                        |    |   |    |     |     |                                   |    |  |     |     |       |                                       |     |   |    |     |       |  |     |  |    |     |     |  |     |                  |  |     |     |     |     |  |  |     |     |     |    |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| Fee Code  | Fee (\$)   | Fee Code                         | Fee (\$)     |  |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |     |     |                        |  |   |              |       |              |       |   |          |          |          |          |          |  |    |     |     |                        |    |   |    |     |     |                                   |    |  |     |     |       |                                       |     |   |    |     |       |  |     |  |    |     |     |  |     |                  |  |     |     |     |     |  |  |     |     |     |    |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 105   | 130  | 205                              | 65           | Surcharge - late filing fee or oath  |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |     |     |                        |  |   |              |       |              |       |   |          |          |          |          |          |  |    |     |     |                        |    |   |    |     |     |                                   |    |  |     |     |       |                                       |     |   |    |     |       |  |     |  |    |     |     |  |     |                  |  |     |     |     |     |  |  |     |     |     |    |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 127   | 50   | 227                              | 25           | Surcharge - late provisional filing fee or cover sheet                     |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |     |     |                        |  |   |              |       |              |       |   |          |          |          |          |          |  |    |     |     |                        |    |   |    |     |     |                                   |    |  |     |     |       |                                       |     |   |    |     |       |  |     |  |    |     |     |  |     |                  |  |     |     |     |     |  |  |     |     |     |    |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 139   | 130  | 139                              | 13           | Non-English specification  |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |     |     |                        |  |   |              |       |              |       |   |          |          |          |          |          |  |    |     |     |                        |    |   |    |     |     |                                   |    |  |     |     |       |                                       |     |   |    |     |       |  |     |  |    |     |     |  |     |                  |  |     |     |     |     |  |  |     |     |     |    |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 147   | 2,520  | 147                              | 2,520        | For filing a request for ex parte reexamination                            |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |     |     |                        |  |   |              |       |              |       |   |          |          |          |          |          |  |    |     |     |                        |    |   |    |     |     |                                   |    |  |     |     |       |                                       |     |   |    |     |       |  |     |  |    |     |     |  |     |                  |  |     |     |     |     |  |  |     |     |     |    |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 112   | 920  | 112                              | 920          | Requesting publication of SIR prior to Examiner action                     |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |     |     |                        |  |   |              |       |              |       |   |          |          |          |          |          |  |    |     |     |                        |    |   |    |     |     |                                   |    |  |     |     |       |                                       |     |   |    |     |       |  |     |  |    |     |     |  |     |                  |  |     |     |     |     |  |  |     |     |     |    |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 112   | 1,840  | 112                              | 1,840        | Requesting publication of SIR after Examiner action                        |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |     |     |                        |  |   |              |       |              |       |   |          |          |          |          |          |  |    |     |     |                        |    |   |    |     |     |                                   |    |  |     |     |       |                                       |     |   |    |     |       |  |     |  |    |     |     |  |     |                  |  |     |     |     |     |  |  |     |     |     |    |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 113   | 110  | 215                              | 55           | Extension for reply within first month                                     |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |     |     |                        |  |   |              |       |              |       |   |          |          |          |          |          |  |    |     |     |                        |    |   |    |     |     |                                   |    |  |     |     |       |                                       |     |   |    |     |       |  |     |  |    |     |     |  |     |                  |  |     |     |     |     |  |  |     |     |     |    |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 113   | 400  | 216                              | 20           | Extension for reply within second month                                    |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |     |     |                        |  |   |              |       |              |       |   |          |          |          |          |          |  |    |     |     |                        |    |   |    |     |     |                                   |    |  |     |     |       |                                       |     |   |    |     |       |  |     |  |    |     |     |  |     |                  |  |     |     |     |     |  |  |     |     |     |    |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 117   | 920  | 217                              | 46           | Extension for reply within third month                                     |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |     |     |                        |  |   |              |       |              |       |   |          |          |          |          |          |  |    |     |     |                        |    |   |    |     |     |                                   |    |  |     |     |       |                                       |     |   |    |     |       |  |     |  |    |     |     |  |     |                  |  |     |     |     |     |  |  |     |     |     |    |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 118   | 1,440  | 218                              | 720          | Extension for reply within fourth month                                    |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |     |     |                        |  |   |              |       |              |       |   |          |          |          |          |          |  |    |     |     |                        |    |   |    |     |     |                                   |    |  |     |     |       |                                       |     |   |    |     |       |  |     |  |    |     |     |  |     |                  |  |     |     |     |     |  |  |     |     |     |    |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 128   | 1,960  | 228                              | 980          | Extension for reply within fifth month                                     |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |     |     |                        |  |   |              |       |              |       |   |          |          |          |          |          |  |    |     |     |                        |    |   |    |     |     |                                   |    |  |     |     |       |                                       |     |   |    |     |       |  |     |  |    |     |     |  |     |                  |  |     |     |     |     |  |  |     |     |     |    |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 119   | 320  | 219                              | 160          | Notice of Appeal   |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |     |     |                        |  |   |              |       |              |       |   |          |          |          |          |          |  |    |     |     |                        |    |   |    |     |     |                                   |    |  |     |     |       |                                       |     |   |    |     |       |  |     |  |    |     |     |  |     |                  |  |     |     |     |     |  |  |     |     |     |    |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 120   | 320  | 220                              | 160          | Filing a brief in support of an appeal                                     |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |     |     |                        |  |   |              |       |              |       |   |          |          |          |          |          |  |    |     |     |                        |    |   |    |     |     |                                   |    |  |     |     |       |                                       |     |   |    |     |       |  |     |  |    |     |     |  |     |                  |  |     |     |     |     |  |  |     |     |     |    |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 121   | 260  | 221                              | 14           | Request for oral hearing   |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |     |     |                        |  |   |              |       |              |       |   |          |          |          |          |          |  |    |     |     |                        |    |   |    |     |     |                                   |    |  |     |     |       |                                       |     |   |    |     |       |  |     |  |    |     |     |  |     |                  |  |     |     |     |     |  |  |     |     |     |    |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 138   | 1,510  | 138                              | 1,510        | Petition to institute a public use proceeding                              |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |     |     |                        |  |   |              |       |              |       |   |          |          |          |          |          |  |    |     |     |                        |    |   |    |     |     |                                   |    |  |     |     |       |                                       |     |   |    |     |       |  |     |  |    |     |     |  |     |                  |  |     |     |     |     |  |  |     |     |     |    |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 140   | 110  | 240                              | 55           | Petition to revive - unavoidable   |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |     |     |                        |  |   |              |       |              |       |   |          |          |          |          |          |  |    |     |     |                        |    |   |    |     |     |                                   |    |  |     |     |       |                                       |     |   |    |     |       |  |     |  |    |     |     |  |     |                  |  |     |     |     |     |  |  |     |     |     |    |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 141   | 1,280  | 241                              | 640          | Petition to revive - unintentional   |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |     |     |                        |  |   |              |       |              |       |   |          |          |          |          |          |  |    |     |     |                        |    |   |    |     |     |                                   |    |  |     |     |       |                                       |     |   |    |     |       |  |     |  |    |     |     |  |     |                  |  |     |     |     |     |  |  |     |     |     |    |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 141   | 1,280  | 242                              | 640          | Utility issue fee (or reissue)   |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |     |     |                        |  |   |              |       |              |       |   |          |          |          |          |          |  |    |     |     |                        |    |   |    |     |     |                                   |    |  |     |     |       |                                       |     |   |    |     |       |  |     |  |    |     |     |  |     |                  |  |     |     |     |     |  |  |     |     |     |    |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 142   | 460  | 243                              | 230          | Design issue fee   |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |     |     |                        |  |   |              |       |              |       |   |          |          |          |          |          |  |    |     |     |                        |    |   |    |     |     |                                   |    |  |     |     |       |                                       |     |   |    |     |       |  |     |  |    |     |     |  |     |                  |  |     |     |     |     |  |  |     |     |     |    |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 144   | 620  | 244                              | 310          | Plant issue fee  |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |     |     |                        |  |   |              |       |              |       |   |          |          |          |          |          |  |    |     |     |                        |    |   |    |     |     |                                   |    |  |     |     |       |                                       |     |   |    |     |       |  |     |  |    |     |     |  |     |                  |  |     |     |     |     |  |  |     |     |     |    |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 122   | 120  | 122                              | 130          | Petitions to the Commissioner  |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |     |     |                        |  |   |              |       |              |       |   |          |          |          |          |          |  |    |     |     |                        |    |   |    |     |     |                                   |    |  |     |     |       |                                       |     |   |    |     |       |  |     |  |    |     |     |  |     |                  |  |     |     |     |     |  |  |     |     |     |    |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 123   | 52   | 123                              | 52           | Processing fee under 37 CFR 1.17(q)  |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |     |     |                        |  |   |              |       |              |       |   |          |          |          |          |          |  |    |     |     |                        |    |   |    |     |     |                                   |    |  |     |     |       |                                       |     |   |    |     |       |  |     |  |    |     |     |  |     |                  |  |     |     |     |     |  |  |     |     |     |    |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 126   | 180  | 126                              | 180          | Submission of Information Disclosure Stmt                                  |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |     |     |                        |  |   |              |       |              |       |   |          |          |          |          |          |  |    |     |     |                        |    |   |    |     |     |                                   |    |  |     |     |       |                                       |     |   |    |     |       |  |     |  |    |     |     |  |     |                  |  |     |     |     |     |  |  |     |     |     |    |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 58*   | 40   | 58*                              | 40           | Recording each patent assignment per property (times number of properties) | 40.00           |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |     |     |                        |  |   |              |       |              |       |   |          |          |          |          |          |  |    |     |     |                        |    |   |    |     |     |                                   |    |  |     |     |       |                                       |     |   |    |     |       |  |     |  |    |     |     |  |     |                  |  |     |     |     |     |  |  |     |     |     |    |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 148   | 740  | 248                              | 370          | Filing a submission after final rejection (37 CFR 1.129(a))                |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |     |     |                        |  |   |              |       |              |       |   |          |          |          |          |          |  |    |     |     |                        |    |   |    |     |     |                                   |    |  |     |     |       |                                       |     |   |    |     |       |  |     |  |    |     |     |  |     |                  |  |     |     |     |     |  |  |     |     |     |    |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 149   | 740  | 249                              | 370          | For each additional invention to be examined (37 CFR 1.129(b))             |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |     |     |                        |  |   |              |       |              |       |   |          |          |          |          |          |  |    |     |     |                        |    |   |    |     |     |                                   |    |  |     |     |       |                                       |     |   |    |     |       |  |     |  |    |     |     |  |     |                  |  |     |     |     |     |  |  |     |     |     |    |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 179   | 740  | 279                              | 370          | Request for Continued Examination (RCE)                                    |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |     |     |                        |  |   |              |       |              |       |   |          |          |          |          |          |  |    |     |     |                        |    |   |    |     |     |                                   |    |  |     |     |       |                                       |     |   |    |     |       |  |     |  |    |     |     |  |     |                  |  |     |     |     |     |  |  |     |     |     |    |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 169   | 900  | 169                              | 900          | Request for expedited examination of a design application                  |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |     |     |                        |  |   |              |       |              |       |   |          |          |          |          |          |  |    |     |     |                        |    |   |    |     |     |                                   |    |  |     |     |       |                                       |     |   |    |     |       |  |     |  |    |     |     |  |     |                  |  |     |     |     |     |  |  |     |     |     |    |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| <b>1. BASIC FILING FEE</b><br><table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>101</td><td>740</td><td>201</td><td>370</td><td>Utility filing fee</td><td>740.00</td></tr> <tr><td>106</td><td>330</td><td>206</td><td>165</td><td>Design filing fee</td><td></td></tr> <tr><td>107</td><td>510</td><td>207</td><td>255</td><td>Plant filing fee</td><td></td></tr> <tr><td>108</td><td>740</td><td>208</td><td>370</td><td>Reissue filing fee</td><td></td></tr> <tr><td>114</td><td>160</td><td>214</td><td>80</td><td>Provisional filing fee</td><td></td></tr> </tbody> </table> SUBTOTAL (1) (\$) 740.00 | Large Entity   |                                  | Small Entity |  | Fee Description | Fee Paid        | Fee Code | Fee (\$) | Fee Code | Fee (\$) | 101      | 740 | 201 | 370 | Utility filing fee | 740.00                              | 106 | 330 | 206 | 165 | Design filing fee |  | 107 | 510 | 207 | 255 | Plant filing fee |                           | 108 | 740 | 208   | 370 | Reissue filing fee |   | 114 | 160 | 214 | 80  | Provisional filing fee |  | <b>2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE</b><br><table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>103</td><td>18</td><td>203</td><td>9</td><td>Claims in excess of 20</td><td></td></tr> <tr><td>102</td><td>84</td><td>202</td><td>42</td><td>Independent claims in excess of 3</td><td></td></tr> <tr><td>104</td><td>280</td><td>204</td><td>140</td><td>Multiple dependent claim, if not paid</td><td></td></tr> <tr><td>109</td><td>84</td><td>209</td><td>42</td><td>** Reissue independent claims over original patent</td><td></td></tr> <tr><td>110</td><td>18</td><td>210</td><td>9</td><td>** Reissue claims in excess of 20 and over original patent</td><td></td></tr> </tbody> </table> SUBTOTAL (2) (\$) 1058.00<br>**or number previously paid, if greater. For Reissues, see above. | Large Entity |       | Small Entity |       | Fee Description                                     | Fee Paid | Fee Code | Fee (\$) | Fee Code | Fee (\$) | 103                                    | 18 | 203 | 9   | Claims in excess of 20 |    | 102                                     | 84 | 202 | 42  | Independent claims in excess of 3 |    | 104                                    | 280 | 204 | 140   | Multiple dependent claim, if not paid |     | 109                                     | 84 | 209 | 42    | ** Reissue independent claims over original patent |     | 110                                    | 18 | 210 | 9   | ** Reissue claims in excess of 20 and over original patent |     |                  |  |     |     |     |     |  |  |     |     |     |    |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| Large Entity  |  | Small Entity                     |              | Fee Description  |                 |                 | Fee Paid |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |     |     |                        |  |   |              |       |              |       |   |          |          |          |          |          |  |    |     |     |                        |    |   |    |     |     |                                   |    |  |     |     |       |                                       |     |   |    |     |       |  |     |  |    |     |     |  |     |                  |  |     |     |     |     |  |  |     |     |     |    |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| Fee Code  | Fee (\$)   | Fee Code                         | Fee (\$)     |  |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |     |     |                        |  |   |              |       |              |       |   |          |          |          |          |          |  |    |     |     |                        |    |   |    |     |     |                                   |    |  |     |     |       |                                       |     |   |    |     |       |  |     |  |    |     |     |  |     |                  |  |     |     |     |     |  |  |     |     |     |    |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 101   | 740  | 201                              | 370          | Utility filing fee   | 740.00          |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |     |     |                        |  |   |              |       |              |       |   |          |          |          |          |          |  |    |     |     |                        |    |   |    |     |     |                                   |    |  |     |     |       |                                       |     |   |    |     |       |  |     |  |    |     |     |  |     |                  |  |     |     |     |     |  |  |     |     |     |    |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 106   | 330  | 206                              | 165          | Design filing fee  |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |     |     |                        |  |   |              |       |              |       |   |          |          |          |          |          |  |    |     |     |                        |    |   |    |     |     |                                   |    |  |     |     |       |                                       |     |   |    |     |       |  |     |  |    |     |     |  |     |                  |  |     |     |     |     |  |  |     |     |     |    |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 107   | 510  | 207                              | 255          | Plant filing fee   |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |     |     |                        |  |   |              |       |              |       |   |          |          |          |          |          |  |    |     |     |                        |    |   |    |     |     |                                   |    |  |     |     |       |                                       |     |   |    |     |       |  |     |  |    |     |     |  |     |                  |  |     |     |     |     |  |  |     |     |     |    |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 108   | 740  | 208                              | 370          | Reissue filing fee   |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |     |     |                        |  |   |              |       |              |       |   |          |          |          |          |          |  |    |     |     |                        |    |   |    |     |     |                                   |    |  |     |     |       |                                       |     |   |    |     |       |  |     |  |    |     |     |  |     |                  |  |     |     |     |     |  |  |     |     |     |    |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 114   | 160  | 214                              | 80           | Provisional filing fee   |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |     |     |                        |  |   |              |       |              |       |   |          |          |          |          |          |  |    |     |     |                        |    |   |    |     |     |                                   |    |  |     |     |       |                                       |     |   |    |     |       |  |     |  |    |     |     |  |     |                  |  |     |     |     |     |  |  |     |     |     |    |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| Large Entity  |  | Small Entity                     |              | Fee Description  | Fee Paid        |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |     |     |                        |  |   |              |       |              |       |   |          |          |          |          |          |  |    |     |     |                        |    |   |    |     |     |                                   |    |  |     |     |       |                                       |     |   |    |     |       |  |     |  |    |     |     |  |     |                  |  |     |     |     |     |  |  |     |     |     |    |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| Fee Code  | Fee (\$)   | Fee Code                         | Fee (\$)     |  |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |     |     |                        |  |   |              |       |              |       |   |          |          |          |          |          |  |    |     |     |                        |    |   |    |     |     |                                   |    |  |     |     |       |                                       |     |   |    |     |       |  |     |  |    |     |     |  |     |                  |  |     |     |     |     |  |  |     |     |     |    |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 103   | 18   | 203                              | 9            | Claims in excess of 20   |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |     |     |                        |  |   |              |       |              |       |   |          |          |          |          |          |  |    |     |     |                        |    |   |    |     |     |                                   |    |  |     |     |       |                                       |     |   |    |     |       |  |     |  |    |     |     |  |     |                  |  |     |     |     |     |  |  |     |     |     |    |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 102   | 84   | 202                              | 42           | Independent claims in excess of 3  |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |     |     |                        |  |   |              |       |              |       |   |          |          |          |          |          |  |    |     |     |                        |    |   |    |     |     |                                   |    |  |     |     |       |                                       |     |   |    |     |       |  |     |  |    |     |     |  |     |                  |  |     |     |     |     |  |  |     |     |     |    |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 104   | 280  | 204                              | 140          | Multiple dependent claim, if not paid                                      |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |     |     |                        |  |   |              |       |              |       |   |          |          |          |          |          |  |    |     |     |                        |    |   |    |     |     |                                   |    |  |     |     |       |                                       |     |   |    |     |       |  |     |  |    |     |     |  |     |                  |  |     |     |     |     |  |  |     |     |     |    |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 109   | 84   | 209                              | 42           | ** Reissue independent claims over original patent                         |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |     |     |                        |  |   |              |       |              |       |   |          |          |          |          |          |  |    |     |     |                        |    |   |    |     |     |                                   |    |  |     |     |       |                                       |     |   |    |     |       |  |     |  |    |     |     |  |     |                  |  |     |     |     |     |  |  |     |     |     |    |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 110   | 18   | 210                              | 9            | ** Reissue claims in excess of 20 and over original patent                 |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |     |     |                        |  |   |              |       |              |       |   |          |          |          |          |          |  |    |     |     |                        |    |   |    |     |     |                                   |    |  |     |     |       |                                       |     |   |    |     |       |  |     |  |    |     |     |  |     |                  |  |     |     |     |     |  |  |     |     |     |    |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| <b>SUBTOTAL (3) (\$) 1848.00</b>  |  | <b>SUBTOTAL (3) (\$) 1848.00</b> |              |  |                 |                 |          |          |          |          |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |   |     |     |     |     |                        |  |   |              |       |              |       |   |          |          |          |          |          |  |    |     |     |                        |    |   |    |     |     |                                   |    |  |     |     |       |                                       |     |   |    |     |       |  |     |  |    |     |     |  |     |                  |  |     |     |     |     |  |  |     |     |     |    |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |

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